Date:

Debtor

	Office States	Dankrupicy Court	
In re	Eastern Distri	ct of Pennsylvania Case No.: 13 - 15577 - 4	P
	Ana Virginia Cruz	CERTIFICATION OF BUSINESS DEBTO REGARDING MONTHLY REPORT , being of full age and duly sworn upon	
	 I am the business Debtor(s) in the above I have completed and attached a Month A hy 2017 All of the information in the Monthly F to the best of my knowledge, information and 	y Financial Report for the month of nancial Report is complete, true and correct	
	This certification and all attachments States Bankruptcy Court, the United States in accordance with Section 1304 and Section Code.	ts shall be filed with the Clerk of the United Trustee and the Chapter 13 Standing Trustee in 704(8) of the United States Bankruptey	>
	Date: 7/17/17 Taxa	Debto	_ or
		•	

h. Food

i. Medical (Bank

TRUCK Repour

k. Truck expenses Gas

CASE NO. 13-15577	MONTH ENDING 5-3 - 2017
l. Clothing	20,00
m. Gifts – donations	The state of the s
n. Mambership -,	A management of the state of th
o. Other Letury VS	509.72
TOTAL DISBURSEMENTS	# 17,874.46
4. Balance at end of reporting period [(1-2)-3] - 16,454.6/
 Are you paying all your debts (post filin obligations and amounts due at end of c 	g) as they are incurred? If not, list outstanding urrent period on Schedule C. yes
6. Is all insurance paid up-to-date? 4es	t
Debtor in Possession Checking Account(s):	
NAME, LOCATION AND NUMBER(S) TD Bank XXXX 7131
	, Phillisburg, NJ 08833
BRANCH 1321 POUTE 22	, Phillisburg, NJ 08833
BRANCH 1321 POUTE 22	
BRANCH 1321 LOUTE 22 Debtor in Possession Savings Account(s) an	, Phillisburg, NJ 08833
BRANCH 1321 LOUTE 22 Debtor in Possession Savings Account(s) an DESCRIBE: 11	, Phillisburg, NJ 08833
BRANCH 1321 LOUTE 22 Debtor in Possession Savings Account(s) and DESCRIBE: 1/A BRANCH: 1/A	, Phillisburg, NJ 08833

Gifts – donations/Name(s) of recipient(s): N

Tuition(s) list name and school(s): N/N

CASE NO. 13-15577

MONTH ENDING 5-31-2017

SCHEDULE C

Outstanding obligations: (List payee and date incurred).

I DECLARE THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE AND CORRECT. I FURTHER CERTIFY THAT ALL TAX REPORTS OR RETURNS WHICH BECAME DUE DURING THE REPORTING PERIOD HAVE BEEN FILED AND ALL REQUIRED PAYMENTS MADE.

SIGNATURE OF DEBTOR(S)

DATE